## THOM: TAX: ATA8

FEC FORM 1

## STATEMENT OF ORGANIZATION

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2015 MAY 14 AM 10: 43

				Office Use Only	
NAME OF COMMITTEE (in full)		(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Grassley Hawkey	/e Fu	nd			
ADDRESS (number and street)	PO Box	( 25132 			
☐ (Check if address is changed)	St Paul			MN , 55125 , ,	
	(	CITY A		STATE ▲ ZIP CODE ▲	
COMMITTEE'S E-MAIL ADDRE	ss				
(Check if address is changed)	tkabrid	ck@gmail.com			
	Optiona	al Second E-Mail Add	dress		
COMMITTEE'S WEB PAGE ADI (Check if address is changed)		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			
2. DATE 05 13 2015					
3. FEC IDENTIFICATION NUMBER ▶ C					
4. IS THIS STATEMENT NEW (N) OR AMENDED (A)					
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.					
Type or Print Name of Treasure	, <u>T</u>	50003	Kabricle		
Signature of Treasurer	A.	<u> </u>	VIII	Date [65] (13) (2015)	
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.  ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.					
Office Use Only			For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100	CCL. CLISNI I	

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TYPE OF COMMITTEE					
Candidate Committee:					
(a)	O	This committee is a principal campaign committee. (Complete the candidate information below.)			
(b)	0	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete information below.)	the candidate		
Nam Cano	e of didate		<u></u>		
	didate / Affiliati	ion Sought: House Senate President	State		
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name Cand	e of lidate				
Par	ty Con	nmittee:			
(d)			nocratic, ublican, etc.) Party.		
Poli	tical A	action Committee (PAC):			
(e)	$\Box$	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connect	ed organization is a:		
•		n n	bor Organization		
		n n	J		
		Membership Organization Trade Association Co	operative		
		In addition, this committee is a Lobbyist/Registrant PAC.			
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segreg committee. (i.e., nonconnected committee)	ated fund or party		
		In addition, this committee is a Lobbyist/Registrant PAC.			
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)			
Joint Fundraising Representative:					
(g)	×	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, at least one of which is an authorized committee of a federal candidate.	more political		
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	more political		
Committees Participating in Joint Fundraiser					
		THE HAWKEYE PAC	79		
	1.	GRASSI FY COMMITTEE INC			
	2.	FEC ID number C C002304	82		
÷	3.	FEC ID number			
	4.	FEC ID number			

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4150

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Write or Type Committee	Name	
Grassley Hav	wkeye Fund	
. Name of Any Connec	ted Organization, Affiliated Committee, Joint Fundraising Representative, or Leaders	hip PAC Sponsor
NONE		
		<u>                                     </u>
Mailing Address		
	CITY STATE	ZIP CODE
Custodian of Records: books and records.	: Identify by name, address (phone number optional) and position of the person in pos	session of committ
1	is Kabrick	
Full Name	is Kabrick  673 Kingfisher Ln	<del> </del>
1		
Full Name	673 Kingfisher Ln	
Full Name Mailing Address	673 Kingfisher Ln  Unit F  Woodbury  MN  55125	
Full Name	673 Kingfisher Ln  Unit F  Woodbury  MN  55125	ZIP CODE
Full Name Mailing Address	673 Kingfisher Ln  Unit F  Woodbury  MN  55125	
Full Name  Mailing Address  Title or Position  Treasurer  I I I I I I I I I I I I I I I I I I I	673 Kingfisher Ln  Unit F  Woodbury  CITY  STATE	587 - 8379
Full Name  Mailing Address  Title or Position  Treasurer  List the name any designated agent (expression)	673 Kingfisher Ln  Unit F  Woodbury  CiTY  STATE  Telephone number  651  —  and address (phone number optional) of the treasurer of the committee; and the na	587 - 8379
Full Name  Mailing Address  Title or Position  Treasurer  Treasurer: List the name any designated agent (continuous full Name and Travis)	673 Kingfisher Ln  Unit F  Woodbury  CiTY  STATE  Telephone number  651  —  the and address (phone number optional) of the treasurer of the committee; and the nate.g., assistant treasurer).	587 - 8379
Full Name  Mailing Address  Title or Position  Treasurer  Ireasurer: List the name any designated agent (continuous formula fo	673 Kingfisher Ln  Unit F  Woodbury  CiTY  STATE  Telephone number  e.g., assistant treasurer).	587 - 8379
Full Name  Mailing Address  Title or Position  Treasurer  List the name any designated agent (6)  Full Name Travis of Treasurer	673 Kingfisher Ln  Unit F  Woodbury  CITY  STATE  CITY  STATE  Telephone number  e.g., assistant treasurer).  S Kabrick  [673 Kingfisher Ln	587 - 8379
Full Name  Mailing Address  Title or Position  Treasurer  List the name any designated agent (6)  Full Name Travis of Treasurer	CITY  STATE  CITY  STATE  Telephone number  651  Telephone number  651  Telephone number  673 Kingfisher Ln  1673 Kingfisher Ln  100 Lit F  100	587 - 8379

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	m 1 (Revised 02/2009)	
Full Name of		
Designated Agent		
Mailing Address	·	1 1 1 1 1 1 1 1
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
		······································
Banks or Other safety deposit be	r Depositories: List all banks or other depositories in which the committee deposits fundoxes or maintains funds.	ds, holds accounts, rents
warne or bank,	Depository, etc.	
warne or Bank,		
warne or barik,	Bankers Trust	
Mailing Address	Bankers Trust	
	Bankers Trust	
	Bankers Trust	50309
	Bankers Trust  453 7th St  Des Moines	
Mailing Address	Bankers Trust  453 7th St  Des Moines  CITY  STATE	50309 
	Bankers Trust  453 7th St  Des Moines  CITY  STATE	
Mailing Address	Bankers Trust  453 7th St  Des Moines  CITY  STATE	
Mailing Address	Bankers Trust  453 7th St  Des Moines  CITY  STATE  Depository, etc.	
Mailing Address  Name of Bank,	Bankers Trust  453 7th St  Des Moines  CITY  STATE  Depository, etc.	
Mailing Address  Name of Bank,	Bankers Trust  453 7th St  Des Moines  CITY  STATE  Depository, etc.	

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TRAVIS KABATCH (651) 587-8379 TRAVIS KABATCH (651) 587-8379 KABATCH (671) KABTCH (671) KABATCH (671) KABATCH (671) KABATCH (671) KABTCH (671) KABTCH (671) KABTCH (671) KA

BILL THIRD PARTY

10 FEDERE ELECTION COMMISION

MOODBURY, MN 55125 UNITED STATES US

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A	5/14/15			
PREPARER	DATE PREPARED			

(3/2015)